

**Bureau of Prisons
Health Services
Clinical Encounter**

3:22-cv-01490-CL

Inmate Name: KAAHANUI-MONIZ, SAVANNAH

Date of Birth: 03/27/1981

Encounter Date: 08/28/2017 09:28

Sex: M Race: WHITE
Provider: Souferzadeh, Navid MD

Reg #: 08611-122

Facility: LOM

Unit: A03

Physician - Sick Call Note encounter performed at Health Services.

SUBJECTIVE:**COMPLAINT 1** Provider: Souferzadeh, Navid MD**Chief Complaint:** Pain**Subjective:** 37 y/o inmate comes the clinic for pain in her Right breast. Pt reports " I'm having pain in my breast implant I banged while I was clinging the shower with stick". Pt denies SOB, CB, Bleeding.**Pain:** Yes**Pain Assessment****Date:** 08/28/2017 11:19**Location:** Breast-Right**Quality of Pain:** Pleuritic**Pain Scale:** 3**Intervention:** rest**Trauma Date/Year:****Injury:****Mechanism:****Onset:** 1-2 Days**Duration:** 1-5 Hours**Exacerbating Factors:** nothing**Relieving Factors:** nothing**Comments:****OBJECTIVE:****Exam:****General****Appearance**

Yes: Appears Well, Alert and Oriented x 3

Breast**Breast Tissue**

Yes: Normal Exam, Normal Contours, Symmetrical, Implants

No: Skin Changes, Edema, Peau d'orange, Redness, Erythema, Inflammation, Ulceration(s)

ASSESSMENT:

Transgender, validated male to female, 302.5b - Current

PLAN:**Disposition:**

Follow-up at Sick Call as Needed

Follow-up at Chronic Care Clinic as Needed

Patient Education Topics:COPY
Sensitive But Unclassified
SBU

DOC B

**Bureau of Prisons
Psychology Services
Consultation - Transgender Medical Intervention**

****SENSITIVE BUT UNCLASSIFIED****

| | | | | | |
|----------------|--------------------------|-----------|----------------------|------------|-----------|
| Inmate Name: | KAAHANUI-MONIZ, SAVANNAH | | | Reg #: | 08611-122 |
| Date of Birth: | 03/27/1981 | Sex: | M | Facility: | LOM |
| Date: | 10/30/2017 13:26 | Provider: | Clegg, Carl PhD/DAPC | Unit Team: | CAMP |

Comments

Email below was sent to Health Services on this date:

Inmate was seen for mental health assessment due to a request for gender affirming surgery (see DCLF note dated 10-30-2017). She has openly identified as a female and consistently taken hormone medications since age 14 (currently age 36). She has experienced significant distress and dysfunction in the past due to gender identity issues, and meets the criteria for Gender Dysphoria. However, she has functioned adequately in general population since arrival to this institution in July 2017 and has no other mental health concerns at present. Her expectations regarding transgender treatment interventions are reasonable and appropriate. Gender affirming surgery is likely to support the mental health of this inmate.

Diagnosis:

Gender Dysphoria In Adolescents And Adults, F64.1 - Current

Completed by Clegg, Carl PhD/DAPC on 10/30/2017 14:40

COPY
Sensitive But Unclassified
SBJ

**Bureau of Prisons
Health Services
Consultation Request**

Inmate Name: KAAHANUI-MONIZ, SAVANNAH
Date of Birth: 03/27/1981

Reg #: 08611-122 Complex: LOX
Sex: M

Consultation/Procedure Requested: General Surgery

Subtype: Gen Surg Onsite Eval, NOS

Priority: Emergent

Target Date: 11/13/2018

Reason for Request:

Per MD order and Dr Pelton: Please schedule this Inmate as emergent - transgender with general surgeon due to having in the R() breast implant a pain since having with the broom the (R) breast > 1 month ago

Provisional Diagnosis:

Reported injury to the (R) breast implant and possible damage of the (R) breast implant.

Medications (As of 08/29/2018)

Estradiol Valerate 20 MG/ML IM inj Exp: 01/29/2019. SIG: inject 20mg Intra-Muscularly every Thursday ***non-formulary approved*** exp 7/19/2020 ***pill, line***

Finasteride 5 MG TAB Exp: 01/29/2019 SIG: Take one tablet (5 MG) by mouth daily

Spironolactone 50 MG Tab Exp: 01/29/2019. SIG: Take four tablets (200 MG) by mouth daily (nf expires 8/8/2018)

Allergies (As of 08/29/2018)

No Known Allergies

Health Problems (As of 08/29/2018)

Transgender, self reported, Transgender, validated male to female, Gender Dysphoria In Adolescents And Adults, Stimulant Related Disorders: Severe: Amphetamine Type Substance, Pain in arm, unspecified

Inmate Requires Translator: No

Language:

Additional Records Required:

Comments:

Requested By: Mishchenko, Galyna FNP

Ordered Date: 08/13/2018 10:24

Scheduled Target Date: 11/13/2018 00:00

Level of Care: Medically Necessary - Non-Emergent

8/30/18 - C/O - pain Rt Breast implant - Shifty and aching pain upper portion of Rt arm & midline of arm & hand.

Symptoms occur on on you ago after trauma to R chest wall
- The Rt. Breast prosthesis has shifted inferiorly. no redness or inflammation

PE: - Gen. Healthy, no palp, no nodules, no redness

- Heart - wv. Lung - clear. Ht R, no (20)

- Chest wall - E Bilat Breast implant, symmetrical, no local tenderness
no inflammation & well healed Scar. implant many years
No signs of rupture of implant.

Dr: ? Shifty or malposition of Rt Breast implant.

Rec: 1. mal Scan of - Bili breast prosthesis
2. please Ref patient to plastic surgeon.

B. J. J.

Sensitive But Unclassified

Doc D

NSN7540-00-634-4176

600-11

HEALTH RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

Date:

10/28/21

INMATE REQUEST FOR TRIAGE SERVICES

(Formulario y Registro para Atencion Medica de Confinados)

Complaint(Queja), What is your medical problem?(Caul es su problema?)

Subjective:

please look at the back

How long have you had this problem? (Durante cuanto tiempo ha tenido este problema?)

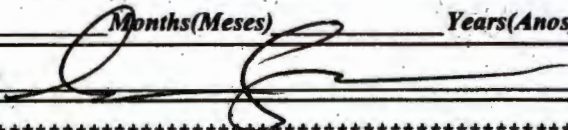
Days (Dias)

Months(Meses)

Years(Anos)

4 years

Signature(Firma)



Objective:

Temp: _____

Pulse: _____

RR: _____

B/P: _____

Oxygen Sat: _____

Pain Scale: _____

/10

Visual Acuity: _____

Fingerstick: _____

Triage Findings:

Triage Personnel=s signature:

FCC Lompoc

PATIENT=S NAME (Last, First, Middle initial)

ID Number:

Savannah Kaakaner - Menz 08611-122

In 2017 I was cleaning the shower with the Long stick Scrubber and I jammed the stick into my right breast. Since then I've experier Pain on the right side directly under my armpit at times its a really bad pain, At time my arm goes numb I know that my implant did not Rupture but I constantly went to medical complaining about the pain I ~~had~~ seen a general Surgeon in 2018 who recomended a MRI and please refer patient to plastic surgeon I seen the MRI technician and the results was like a mamogram and nothing else was done Since then I've had constant pain for the last four years at times my arm goes Numb from under my arm pit to my fingers I have non stop for four year have tried to get it resolved but beacau the staff has not dealt with this kind of problem they dont know what to do. Recently I was seen by Dr. Watson and he recomended a Mamogram and to be seen by the plastic surgeon. But my ~~implant~~ Muscle is gotten worse and worse I some nights cant sleep because of the pain and I know my body my right breast has gotten worse and worse I believe you know what it is like. I have tried and tried to get this resolved I dont know how long more before it will be worse I need help tring to get this resolved as fast as possible My you please help me mitigate this issue beacuae I dont know how else to ~~come~~ turn to right now because I really tried it all I need to see a plastic surgeon soon as possible I am really trying to get this taken care of I know my Muscle is torn. ~~and the is deareated~~ please if there is anything that you could help me I would really appreciate ~~at the~~ The pain and numbness is keeping me up at night and is deteriorating fast.

Thank you
PAVannah K. B. Harris 122

FCC 1330.16
May 14, 2008
Attachment 1

INFORMAL RESOLUTIONDATE: 07/14/2021

INFORMAL RESOLUTION INSTRUCTIONS: STAFF MUST COMPLETE AND ATTACH THE ORIGINAL OF THIS FORM TO EACH BP-9, WHEN THE COMPLAINT CANNOT BE INFORMALLY RESOLVED. THE BP-9 WILL NOT BE ACCEPTED WITHOUT THIS COMPLETED FORM, EXCEPT THOSE APPEALING UDC/IDC ACTIONS. INFORMAL RESOLUTION FORMS WILL NEVER BE GIVEN TO THE INMATE TO COMPLETE.

NAME: • KAAHANUI-MONIZ, SAVANNAH REG. NO.: 08611-422 UNIT: CAMP

DATE BP-9 REQUESTED: 7-20-2021
DATE BP-9 ISSUED : 7-20-2021
DATE BP-9 RETURNED : 7-30-2021

INMATE'S COMPLAINT: Inmate Kaahanui-Moniz claims she has not been provided proper medical treatment regarding chest pain caused by her breast implant while being housed at the Satellite Camp. Inmate Kaahanui-Moniz claims she has to reposition her breast implant every morning. Inmate Kaahanui-Moniz claims that her breast implant shifts throughout the day and causes muscular pain that radiates from her side to her back. Inmate Kaahanui-Moniz claims that Health Service Staff have not properly addressed his medical concerns.

RELIEF REQUESTED: Inmate Kaahanui-Moniz is seeking a MRI and to be seen by a plastic surgeon to assess if the breast implant pocket is damaged and causing her chest.

ACTION TAKEN TO INFORMALLY RESOLVE COMPLAINT: A review of this matter was conducted. The Health Services Department has indicated that you have been scheduled for treatment regarding your claim of breast pain. Please follow up with the Health Services Department directly.

Accordingly, this response is provided for **informational purposes only**. If you are not satisfied with this reply, you may submit an appeal on the appropriate form (BP-9) to the Warden.

CORRECTIONAL COUNSELOR: [Signature] DATE: 7/14/21UNIT MANAGER'S COMMENTS/ASSISTANCE:UNIT MANAGER: [Signature] DATE: 7/14/21

Doc F

TRULINCS 08611122 - KAAHANUI-MONIZ, SAVANNAH - Unit: LOM-A-A

FROM: Psychology
TO: 08611122
SUBJECT: RE:***Inmate to Staff Message***
DATE: 07/26/2021 02:22:02 PM

Understood. I see they are still processing your referral.
-Dr. Clemmer

>>> ~^!"KAAHANUI-MONIZ, ~^!"SAVANNAH" <08611122@inmatemessage.com> 7/24/2021 8:34 PM >>>
To: Ms. clemmer
Inmate Work Assignment: laundry

I just sent this to medical again i just wanted to show you that i have been really trying to be seen i have had to practically beg to be seen for pain medication

-----KAAHANUI-MONIZ, SAVANNAH on 7/24/2021 8:32 PM wrote:

>

I am now waiting to get scheduled to go to the plastic surgeon I've been trying to get this taken care of for 4 years I have been in significant pain where i can not sleep at night and my arm goes numb i have been trying to get this addressed from the medical team down at medical as i was ask to check directly with medical staff as it was stated in my BP 8 but no one seems to know, on Thursday i had to practically beg the DR that was on duty get to be seen because i have put in two sick calls for something to cope with my pain i received IB 400 and a muscle rub but that is only to temporarily take care of the pain please i am begging i need to be seen i have tried all i could trying to talk to staff this pain affects my day to day activities as stated in Program statement patient care #7 section b where it states due to significant pain and it affects my day to day activities i am not able to do any physical work or activities. Please i know I've been approved to be seen by a plastic surgeon please can i get this fixed as soon as possible.

FCC Lompoc
Reg #08611-122

Kaahanui-Moniz, Savannah

Visit Note - October 19, 2021

PMS ID: 109161PAT000002004 Sex: Male (Transgender female) DOB: 03/27/1981 Phone: (805) 735-2771 MRN: MM0000001998

Medical History

None

Surgical History

None

Plastic Surgery HistoryPlastic Surgery History
Augmentation mammoplasty**Family History of Breast Cancer**

Do you have a family history of breast cancer?: No

Skin Conditions

None

Skin ProtectionDo you wear sunscreen?: No
Do you tan in a tanning salon?: No**Family History of Melanoma**Do you have a family history of Melanoma?: No
None**Social History**

EtOH none

Single Question Alcohol
Screening: 0 days
Exercise: Once a day
Smoking status - Former smoker**Medications**estradiol valerate 20 mg/mL
Intramuscular - oil
finasteride 1 mg Oral - tablet**Allergies**

No known drug allergies

ROS

Provider reviewed on Oct 19, 2021.

A focused review of systems was performed including Allergic

Chief Complaint: Breast (Implant Exchange)

HPI: This is a 40 year old male (Transgender female) who is being seen for a chief complaint of breast (implant exchange), involving the bilateral breasts and associated with breast pain on the right breast. The patient is interested in implant exchange, Her implant has been a problem for the last several years. correction of capsular contracture, and implant removal. Their bra size is 40. Their cup size is DD. Their desired cup size range is DD. The patient has the following breast complaints: breast pain. The aesthetic breast deformity is severe in severity. The aesthetic breast deformity has been present for 4 years. Current implants are Saline. The patient has noted no changes in weight. Current weight is 201lbs. The patient has been treated with special garments and supportive bras. patient had a incident at the prison, where a blunt force jammed her right breast causing it to migrate. Patient has been in a lot of pain from the past 4 years.

She has been evaluated by the Corrections psychiatrist and would have major psychological trauma from not continuing to maintain her feminine traits, including breasts.

Breast aug 2015 - Hawaii - saline (850cc and 800cc)

Vitals:

| VITALS | | | | | | | | | | |
|-------------------|---------------|------------|-------|-------|---------|-------|----------|-----------|-----|-----|
| Date | Taken By | B.P. | Pulse | Resp. | O2 Sat. | Temp. | Ht. | Wt. | BMI | BSA |
| 10/19/21 11:11 | Gomes, Mariah | 131/91 SIT | 67 | 15 | | | 71.0 in. | 201.0 lbs | 28 | 2.1 |

* Patient Reported

Exam:

An examination was performed.

Breast

Breast measurements were performed.

Breast Comparisons:

Breast Size Comparison: estimated left breast greater than right breast

Chest Wall Exam: Normal chest wall examination without skeletal abnormalities, masses, congenital deformities, instability or crepitus**Breast Inspection:**

Right Breast Inspection: deflation, upper pole Right implant deflation with capsule contracture

Left Breast Inspection: Capsule contracture.

Breast Palpation: Normal right breast palpation without masses, tenderness or abnormal texture, Normal left breast palpation without masses, tenderness or abnormal texture**LN Exam:** Normal lymphatic exam without lymphadenopathy in cranial, cervical, axillary and inguinal regions**Impression/Plan:**

Plan bilateral removal and replacement with saline or silicone implants.

Visit Note - October 19, 2021

PMS ID: Sex: DOB: Phone: MRN:
 109161PAT000002004 Male (Transgender female) 03/27/1981 (805) 735-2771 MM0000001898

/ Immunologic, Cardiovascular, Constitutional / Symptom, Endocrine, ENT and Mouth, Eyes, Gastrointestinal (G.I.), Genitourinary (G.U.), Integumentary, Musculoskeletal, Neurological, Psychiatric, and Respiratory and was notable for COVID-19 VACCINATION STATUS: Have you been fully vaccinated with one of the approved U.S. vaccines for Covid-19 (2 doses of Pfizer or Moderna, OR one dose of Johnson's Johnson)?

No Problems With Healing, No Problems With Scarring (hypertrophic Or Keloid), No Rash, No Chest Pain, No Fever Or Chills, No Thyroid Problems, No Sore Throat, No Nasal Obstruction, No Blurry Vision, No Abdominal Pain, No Constipation, No Bloody Urine, No Joint Aches, No Muscle Weakness, No Neck Stiffness, No Seizures, No Shortness Of Breath, No Wheezing, No Problems With Snoring, No Anxiety, No Depression, No Anorexia, And No Bulimia.

1. Mechanical complication of breast prosthesis

Problem Addressed: Self-limited or minor Initial (T85.44XA)

Plan: Counseling - Prosthesis.

I counseled the patient regarding the following:

Prosthesis Care: Implants, expanders, and other implantable devices are man-made and as such, may not perform completely as expected. These devices may malfunction, rotate, deflate, become exposed, extrude, develop infection, or otherwise fail to perform. In the case of breast implants and expanders, leakage or port malfunction may occur. The long-term effects of silicone leakage have not been definitively established. However, silicone implants are FDA-approved for cosmetic and reconstructive breast surgery in patients 22 years and older, and have a body of scientific literature available for patient review, establishing their safety and efficacy. Prostheses sometimes require unplanned removal. In the case of breast implants and tissue expanders, explantation may be required due to infection, exposure, malfunction, threatened loss, malposition, or dissatisfaction with the device. Also, if an issue with the device threatens to delay the management of life-threatening or other pressing medical conditions, the device may be removed to expedite further care. In some cases, a replacement device may be inserted in the same procedure; in others (e.g., infections), the device is usually not replaced at that time. Future replacement is possible in many cases. A non-healing wound may be an indication of infection of underlying prosthetic material. If present.

Expectations: Explantation of a prosthesis is offered when other non-invasive solutions, or device salvage, have not been successful. Devices that are exposed or threatened with exposure may sometimes be salvaged with surgery to provide adequate tissue coverage over the device. This may require tissue rearrangement (flap surgery). Surgery carries certain risks. The risks, benefits, expectations and alternatives were discussed with the patient, including, but not limited to, the risks of infection, bleeding, scars, injury to nerves, blood vessels or other structures, delayed healing, contour irregularities, need for revision, cosmetic dissatisfaction, and unplanned return to the operating room. The patient verbalized understanding.

Contact office if: the patient develops concerning symptoms like fever, redness, exposure of the device, or drainage.

We discussed the need to adjust the pocket, reinforce the implants with possible need for a mesh like Galaflex to reinforce the lower pocket. She understands that the lower pole was very deficient and constricted and this unfortunately contributed to her current breast deformity.

I discussed the following surgical options with the patient:

Explantation with Replacement: Explantation involves the removal of the device. In many cases, the scar tissue capsule surrounding the device may also be removed. Replacement of an implant may be done with another implant or an expander. Replacement of an expander may be done with an implant or another expander. A drain may be left in place to help drain the space occupied by the device. In most cases, the device can be replaced through the same incision through which it was placed. The removed device may be sent to a pathology lab or returned to the manufacturer depending on protocols.

Plan: Counseling - Transgender Top Surgery.

I counseled the patient regarding the following:

Transgender Care: Patients with gender dysphoria have persistent feelings of gender discomfort or distress that are caused by a discrepancy between their birth sex and their gender identity.

Transgender top surgery (mastectomy or breast augmentation) involves the modification of physical appearance and function of the chest to establish greater congruence with a person's gender identity. Nonsurgical adjuncts can include the use of hormonal treatment such as estrogen or testosterone. In addition, patients may wear breast binders or breast prostheses, but these options are temporary, uncomfortable, and helpful only when patients are fully clothed. Mental health supports are imperative for the care of patients with gender dysphoria.

Expectations: Patients with gender dysphoria are at risk for depression, anxiety, substance abuse, and suicidal thinking, particularly if they lack adequate support systems. Compassionate

Visit Note - October 19, 2021

PMS ID: 109161PAT000002004 Sex: Male (Transgender female) DOB: 03/27/1981 Phone: (805) 735-2771 MRN: MM0000001998

understanding is important and patients may need to be directed to numerous resources. Transgender care is multifaceted and often requires multiple procedures over time.

Contact office if: the patient develops concerning symptoms like fever, redness, warmth, severe pain, bloody urine, difficulty urinating, or unusual drainage. Call 911 in the event of any threats of harm to the patient by the patient or others.

I discussed the following surgical options with the patient:

Breast Augmentation: Breast augmentation involves the placement of an implant (saline or silicone) for enlargement of the breast. It may be placed under or over the pectoralis major muscle. Several incision techniques, including prior scars, periareolar, inframammary, and transaxillary incisions, may be used. Healing may take 3-4 weeks and activities may be restricted during that time. The risks, benefits, expectations and alternatives to breast augmentation (including incisional approaches, implant styles and manufacturers, and position with respect to the muscle) have been discussed and include, but are not limited to, the risks of infection, bleeding, injury to nerves/vessels/other structures, contour irregularities, asymmetry, implant failure, implant exposure, capsular contracture, implant deflation, rippling, malposition, nipple loss, loss of nipple sensation, delayed healing, visible scarring, dissatisfaction with cosmetic outcome and possibility of unplanned return to the operating room. The rare risk of anaplastic large cell lymphoma, as well as issues regarding radiographic breast screening and lactation, were also discussed with the patient. All questions were answered to the patient's satisfaction. No guarantee or warranty was given or implied regarding cosmetic outcome, longevity of results, or satisfaction therewith.

Saline Implants: Saline implants are FDA-approved for patients with cosmetic or reconstructive breast concerns. The saline implant has an outer silicone shell which is then filled with sterile saline by the surgeon during surgery. Saline implants may provide a slightly firmer feel to the breast when compared to silicone implants. Saline implant deflation may occur, in which case the breast may become noticeably flatter over a period of hours to weeks. Saline Implants are manufactured by Allergan and Mentor in the United States. Risks of implant placement include capsular contracture, deflation, position change, rippling, infection, bleeding, injury to nerves, nipple sensation change, loss of nipple sensation, contour irregularities, delayed healing, risk of implant loss, possibility of revision, implant failure, implant exposure, nipple loss, cosmetic dissatisfaction and need for additional procedures. Warranty programs are available and the information is furnished by the manufacturer. There is a rare risk of anaplastic large cell lymphoma with implants, and there are active studies in progress monitoring the incidence of this extremely rare condition.

Silicone Implants: Silicone implants are FDA-approved for patients with cosmetic or reconstructive breast concerns, aged 22 and older. The silicone implant has an outer silicone shell which is pre-filled with sterile silicone gel by the manufacturer. The newest generation of silicone implants have a cohesive gel material that resists breakage and leakage. However, leakage may still occur. The long-term health effects of leaking silicone implants have not been conclusively determined, but the FDA was provided with several years of compelling data showing no causal relationship between leaking silicone implants and increased risks of certain diseases. Silicone implants may provide a slightly softer feel to the breast when compared to saline implants, and may confer a slightly more natural shape in some patients. Patient preference is important in this decision. Silicone implant leakage may occur, in which case the breast may or may not have any symptoms. Symptoms might include localized pain, firmness, tenderness or capsular contracture with deformity of the appearance of the breast. Silicone implants are manufactured by Allergan, Sientra and Mentor in the United States. Risks of implant placement include capsular contracture, deflation, position change, rippling, infection, bleeding, injury to nerves, nipple sensation change, loss of nipple sensation, contour irregularities, delayed healing, risk of implant loss, possibility of revision, implant failure, implant exposure, nipple loss, cosmetic dissatisfaction and need for additional procedures. Warranty programs are available and the information is furnished by the manufacturer. There is a rare risk of anaplastic large cell lymphoma with implants, and there are active studies in progress monitoring the incidence of this extremely rare condition.

Pre-Certification:

Transgender top surgery has been deemed an important aspect of care of the transgender patient. She should have her implants to maintain psychological harmony with her identity and lower her chances of depression.

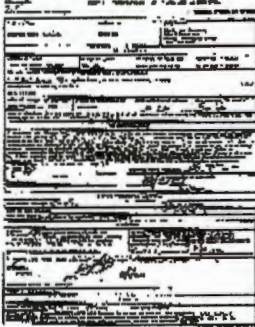
Staff:

Wesley Schooler (Primary Provider) (Bill Under)

Kaahanui-Moniz, Savannah

Visit Note - October 19, 2021

PMS ID: 109161PAT000002004 Sex: Male (Transgender female) DOB: 03/27/1981 Phone: (805) 735-2771 MRN: MM0000001998

| Other Photos | | |
|--|--|--|
|  <p>Federal Bureau of Prisons</p> | | |

Electronically Signed By: Wesley Schooler, 01/12/2022 05:19 PM PST

SHE-133017b
ATTACHMENT A

INFORMAL RESOLUTION

NOTICE TO INMATE: You are advised that prior to filing a Request for Administrative Remedy Form (BP-9), you **MUST** attempt to informally resolve your complaint through your Correctional Counselor except for UDC/DHO related concerns.

Savannah Kaahanui-Moniz 08611-122 6 August 31, 2022
 1. Inmate Name Register Number Unit Date

2. State Below Your Specific Complaint:

I was initially approved for surgery on 8/28/2017 while at FCI Lompoc (Camp). I am still waiting for the surgery. My "Consultation" page on the inmate computer listed a medical consultation that has been removed. The removed consultation is/was associated with the approved surgery. I have already suffered great distress at the hand of the BOP for the unnecessary delays.

3. State What Action You Want Staff To Take To Correct The Situation.

Based on the unnecessary and inexplicable delays, I would like written confirmation that this surgery has been scheduled and that the "consultation" in questions has not been cancelled. I would also like the specific date of the scheduled procedure in order to inform my attorney and sentencing judge.

4. What Efforts Have You Made To Resolve Your Complaint Informally?

Since 2017, I have submitted countless COP OUTs and administrative remedies.

5. Advice To Inmate Regarding Complaint include Program Statement number if applicable)

I TALKED TO DR. GRASKEY AND HE STATED, "YOUR PREVIOUS CONSULTATION WAS CANCELLED DUE TO YOUR TRANSFER. A NEW CONSULTATION REQUEST HAS BEEN SUBMITTED."

6. Informal Resolution WAS ☒ WAS NOT accomplished (circle one)

B. GONZALEZ 9/7/22 Blum 9-8-22
 Correctional Counselor / Date Unit Manager / Date

Received 9/13/22

JUNE 10

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

| | |
|--|-------------------------|
| TO: (Name and Title of Staff Member) HSA for Sheridan / Clinical Director | DATE: 9/13/22 |
| FROM: Savannah Kaahanui-Mama | REGISTER NO.: 08611-122 |
| WORK ASSIGNMENT: Unit 6 | UNIT: 6 Wing 2 |

SUBJECT: (Briefly state your question or concern and the solution you are requesting. Continue on back, if necessary. Your failure to be specific may result in no action being taken. If necessary, you will be interviewed in order to successfully respond to your request.)

I have been in severe pain for the past 5 years I've been trying to get this resolved but I have been put off. The pain is so bad I can not sleep at night at times I feel nauseated and I really need to get surgery I was approved by the Western Region office in February of this year please I am just trying to get this taken care of I don't know what to do, please inform me what to do I am so tired of being in pain, I know I have been approved to see a outside specialist but I am in severe pain I am trying to deal with it as best as possible. Can you expedite this as best as possible. This is too long I have been suffering.

(Do not write below this line)

DISPOSITION:

Signature Staff Member

Date

Record Copy - File; Copy - Inmate

PDF

Prescribed by P5511

This form replaces BP-148.070 dated Oct 86
and BP-S148.070 APR 94

FILE IN SECTION 6 UNLESS APPROPRIATE FOR PRESBYTERY FOLDER

SECTION 6